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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where applicable. All other correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

959 7590 07/10/2007

LAHIVE & COCKFIELD, LLP**ONE POST OFFICE SQUARE****BOSTON, MA 02109-2127****10/12/2007 HDESTAR2 00000030 120080 10626168****01 FC:1501 1440.00 DA****02 FC:1504 300.00 DA****03 FC:8001 12.00 DA**

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

| |
|--------------------|
| (Depositor's name) |
| (Signature) |
| (Date) |

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
|-----------------|-------------|----------------------|---------------------|------------------|

10/626,168 07/23/2003

Narutoshi Sugita

SIW-034CPRCE

9715

TITLE OF INVENTION: FUEL CELL AND FUEL CELL STACK

| APPLN. TYPE | SMALL ENTITY | ISSUE FEE DUE | PUBLICATION FEE DUE | PREV. PAID ISSUE FEE | TOTAL FEE(S) DUE | DATE DUE |
|----------------|--------------|--------------------------|---------------------|----------------------|--------------------------|------------|
| nonprovisional | NO | \$1400 \$1440 | \$300 | \$0 | \$1700 \$1740 | 10/10/2007 |
| EXAMINER | ART UNIT | CLASS-SUBCLASS | | | | |
| CHU, HELEN OK | 1745 | 429-034000 | | | | |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.53)

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev. 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Lahive & Cockfield, LLP

2 Anthony A. Laurentano,

Esq.

3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

HONDA GIKEN KOGYO KABUSHIKI KAISHA**Tokyo, Japan**Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☒ Issue Fee
☒ Publication Fee (No small entity discount permitted)
☒ Advance Order - # of Copies 4

4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)

- ☐ A check is enclosed.
☐ Payment by credit card. Form PTO-2038 is attached.
☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 12-0080 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Date

October 10, 2007

Typed or printed name

Anthony A. Laurentano

Registration No.

38,220

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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| | | |
|---|------------------------|------------------------|
| TRANSMITTAL FORM (to be used for all correspondence after initial filing) | Application Number | 10/626,168-Conf. #9715 |
| | Filing Date | July 23, 2003 |
| | First Named Inventor | Narutoshi SUGITA |
| | Art Unit | 1745 |
| | Examiner Name | H. O. Chu |
| | Attorney Docket Number | SIW-034CPRCE |
| Total Number of Pages In This Submission | | |

ENCLOSURES (Check all that apply)

| | | |
|--|--|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Issue Fee Transmittal Form PTOL-85 Part B Return Receipt Postcard |
| Remarks | | |

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | | | |
|--------------|-------------------------|----------|--------|
| Firm Name | LAHIVE & COCKFIELD, LLP | | |
| Signature | | | |
| Printed name | Anthony A. Laurentano | | |
| Date | October 10, 2007 | Reg. No. | 38,220 |



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 Approved for use through 06/30/2010. OMB 0651-0032
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|--|--|--------------------------|------------------------|
| Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). | | Complete if Known | |
| FEE TRANSMITTAL For FY 2008 | | Application Number | 10/626,168-Conf. #9715 |
| | | Filing Date | July 23, 2003 |
| | | First Named Inventor | Narutoshi SUGITA |
| | | Examiner Name | H. O. Chu |
| | | Art Unit | 1745 |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27 | | Attorney Docket No. | SIW-034CPRCE |
| TOTAL AMOUNT OF PAYMENT (\$) 1,752.00 | | | |

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|--|--|
| METHOD OF PAYMENT (check all that apply) | |
| <input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____ | |
| <input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 12-0080 Deposit Account Name: Lahive & Cockfield, LLP | |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) | |
| <input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee | |
| <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments | |

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|--|---|---------------------|---|---|--|--------------------------------|--|--------------------------------------|--|
| FEE CALCULATION | | | | | | | | | |
| 1. BASIC FILING, SEARCH, AND EXAMINATION FEES | | | | | | | | | |
| | FILING FEES <small>Small Entity</small> | | SEARCH FEES <small>Small Entity</small> | | EXAMINATION FEES <small>Small Entity</small> | | | | |
| Application Type | Fee (\$) | Fee (\$) | Fee (\$) | Fee (\$) | Fee (\$) | Fee (\$) | Fees Paid (\$) | | |
| Utility | 310 | 155 | 510 | 255 | 210 | 105 | | | |
| Design | 210 | 105 | 100 | 50 | 130 | 65 | | | |
| Plant | 210 | 105 | 310 | 155 | 160 | 80 | | | |
| Reissue | 310 | 155 | 510 | 255 | 620 | 310 | | | |
| Provisional | 210 | 105 | 0 | 0 | 0 | 0 | | | |
| | | | | | | | <small>Small Entity</small> Fee (\$) Fee (\$) | | |
| 2. EXCESS CLAIM FEES Fee Description | | | | | | | | | |
| Each claim over 20 (including Reissues) | | | | | | | 50 | 25 | |
| Each independent claim over 3 (including Reissues) | | | | | | | 210 | 105 | |
| Multiple dependent claims | | | | | | | 370 | 185 | |
| Total Claims | | Extra Claims | | Fee (\$) | | Fee Paid (\$) | | Multiple Dependent Claims | |
| | | | | | | | | Fee (\$) Fee Paid (\$) | |
| HP = highest number of total claims paid for, if greater than 20. | | | | | | | | | |
| Indep. Claims | | Extra Claims | | Fee (\$) | | Fee Paid (\$) | | | |
| | | | | | | | | | |
| HP = highest number of independent claims paid for, if greater than 3. | | | | | | | | | |
| 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). | | | | | | | | | |
| Total Sheets | | Extra Sheets | | Number of each additional 50 or fraction thereof | | Fee (\$) | | Fee Paid (\$) | |
| | | | | | | | | | |
| - 100 = | | | | /50 = | | (round up to a whole number) x | | | |
| 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1501 Utility issue fee 1,440.00 1504 Publication fee for early, voluntary, or normal ... 300.00 8001 Printed copy of patent w/o color 12.00 | | | | | | | | | |

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|---------------------|------------------------------|--|-----------------------------------|
| SUBMITTED BY | | | |
| Signature | | | Registration No. (Attorney/Agent) |
| Name (Print/Type) | Anthony A. LaFrentano | | Telephone (617) 994-0753 |
| | | | Date October 10, 2007 |